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A no-more-excuses look at veterinary dentistry

Cat hospital carves a lucrative niche

Mastering the art of employee criticism

JUNE 1990

veterinary economics

THE MAGAZINE OF PRACTICE MANAGEMENT AND FINANCE

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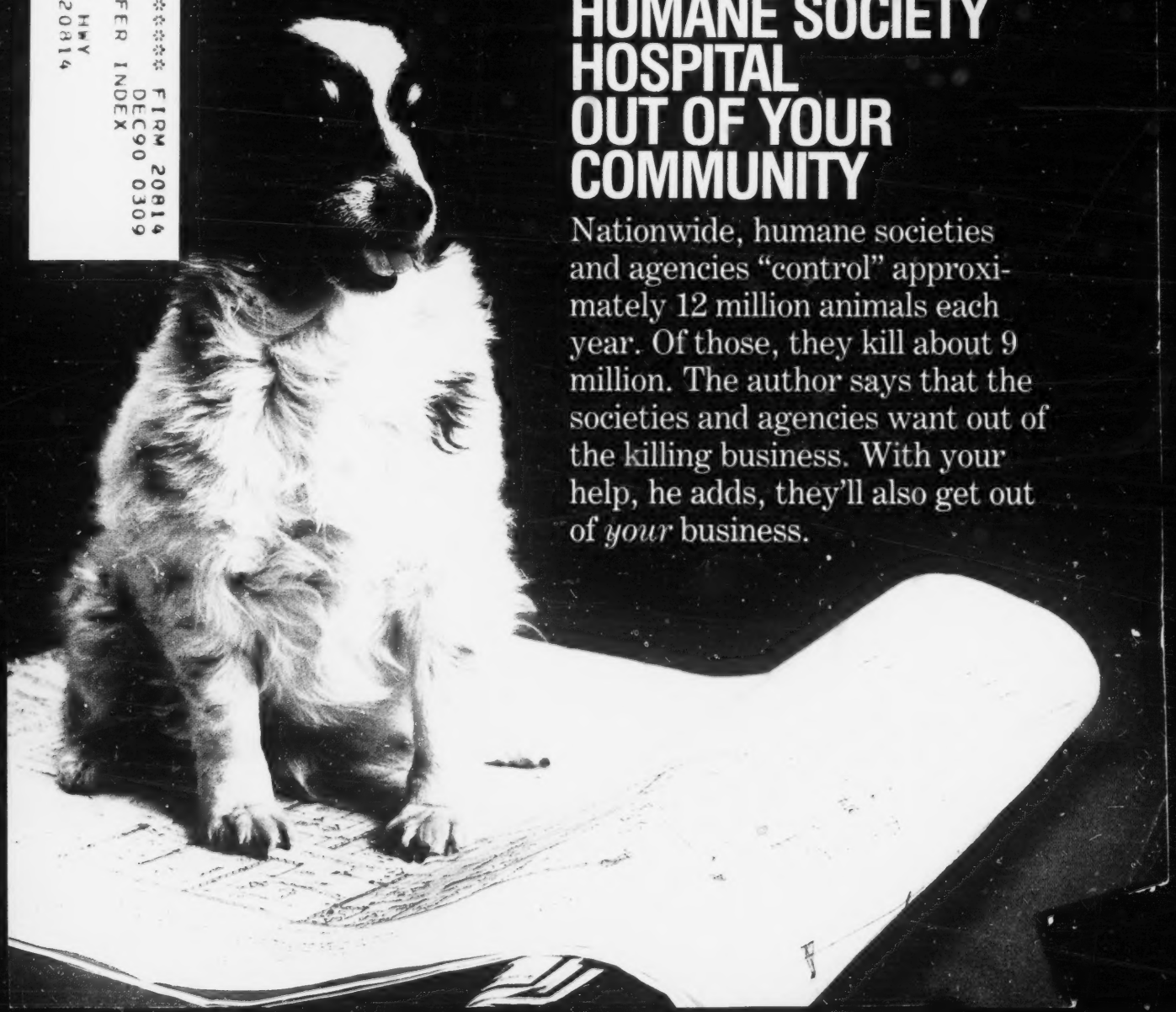

HOW TO KEEP A HUMANE SOCIETY HOSPITAL OUT OF YOUR COMMUNITY

Nationwide, humane societies and agencies "control" approximately 12 million animals each year. Of those, they kill about 9 million. The author says that the societies and agencies want out of the killing business. With your help, he adds, they'll also get out of *your* business.

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MEMO FROM THE EDITOR

An understated start

Dear Ms. Turner:

The enclosed is submitted for consideration to be published in VETERINARY ECONOMICS. . . *Let me know if you will publish it. It is not as controversial as the title sounds, but it will probably light up the Letters to the Editor column.*

Sincerely,
Gordon W. Robinson, VMD

Dear Dr. Robinson:

Yes! We would be interested in printing your article; in fact, we are considering it for the cover position in our June issue. You state your position quite eloquently, and I expect your thoughts will generate a great deal of useful discussion within the profession.

Sincerely,
Becky Turner, Editor

And so began the correspondence that led to this month's cover story. Dr. Robinson and I both may have understated the case in these early letters. Even the process of getting this article to press brought with it discussion, disagreement, interpretation, misinterpretation, and compromise. Now, many faxes, letters, and phone calls later, it is here for your consideration. As you read it, keep in mind a point Dr. Robinson made along the way: It is not an article on reproduction. It is an article on economics.

If our office is another indication of how you may react, "light up" may be too mild; *every time* we discussed this article—its length, the number of pages to assign, the artwork—we spent at least 20 minutes more discussing its content. I expect you will do the same. And if you will share with us some of your thoughts and conversations, we'll keep the light on in the letters department.

Becky Turner

Rebecca R. Turner

veterinary economics

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A Medical Economics Publication

A NO-MORE-EXCUSES LOOK AT VETERINARY DENTISTRY

Your patients need it. Your clients want and will pay for it. Your colleagues are leading the way. Today, there's no reason *not* to get into dentistry.

By Rebecca Gants SPECIAL ASSIGNMENTS EDITOR

In June of 1988, VETERINARY ECONOMICS presented—and countered—the common objections practitioners raise to dentistry. In March of 1989, we countered the objections that clients raise. This year, the objections appear to be over: In a recent survey of your colleagues, *98 percent* said that they offer dental services in their practices.

The survey also showed that dentistry represents a solid 5 percent of gross for 53 percent of the veterinarians who responded. In a $100,000 practice, that equals a $5,000 supplement to income. What's more, 20 percent of the respondents report that dentistry accounts for *more than* 5 percent of their gross incomes.

Take a look at the numbers that follow. Then spend a few moments with the doctors quoted here who have graciously allowed us to look into the finances of their dental programs.

The money bounces right back

Our survey reveals that practitioners spend an average of $2,000 to set up dental programs (see the box on page 48). Thirty-eight percent say they spent $1,000 or less, while 8 percent spent between $5,000 and $7,000. On the average, the doctors report, these dollars are back in the cash drawer within 10 months. For 88 percent of those surveyed, the investment in dental equipment and training paid for itself within a year.

Client compliance shows strength in numbers as well. Half of the respondents say that up to

THE AUTHOR a business and financial writer, has covered the veterinary profession for 15 years.

25 percent of their clients request dental services without inquiring about cost. Twenty-one percent of the doctors report that half of their clients consent without questioning the fees.

For 15 percent of the doctors surveyed, one of every two clients agrees to dental services after discussing the cost. Only 23 percent find less than 20-percent client acceptance based on cost. If your head is spinning by now, consider this finding: 73 percent say that only one in four or fewer of their clients decline dental services based on cost. And 59 percent place this figure at one in 10 or fewer. Less than one-fourth of the practitioners encounter clients who take offense at the suggestion of dental care for their pets.

The value of fresh breath

"The majority of clients trust a preventive-care approach," says Dr. Michael J. Wells, who practices in Matteson, Ill., 30 miles south of Chicago. "We tell clients of the economic and health benefits that a preventive program for a new puppy has over repairing damage later." The 1978 University of Illinois graduate, who began emphasizing better home dental care five years ago as coowner of a multidoctor practice, says he's seen a 400-percent increase in dental income.

Demonstrating dental products and care in the exam room, and sending a quarterly newsletter, Dr. Wells and his coworkers charge from $65 to $70 for a complete prophy, including anesthesia and antibiotics. Since shifting their approach from scaling to polishing, the doctors say they're confident that patients are receiving better care.

> "Look at the animal's teeth as well as its lacerated foot."

Dr. Wells says he recouped a $2,500 investment in equipment within six months. Dental services tally about 10 percent of gross. "You can't go wrong with a dental program," Dr. Wells says. "Clients enjoy a pet that has fresh breath and who is more energetic and eats better because dental infection is no longer present. Just keep offering the service to every client who has a pet needing dental care."

The right tool for the right job

In 1989, Dr. Michael Driscoll purchased a 22-year-old, Cheyenne, Wyo., practice that offered only hand scaling. After beefing up his equipment, his practice income has doubled. Dental services represented 15 percent of his gross in June 1989, when the 1980 Auburn graduate scheduled more dentals than surgeries. With practice expansion, dentistry has shifted to a 10-percent role.

Charging $55 for a prophy, the solo practitioner says he generates 25 dentals a month just by taking the time to look into pets' mouths and educating clients. "Just remind yourself when you walk into the exam room to look at the animal's teeth as well as the lacerated foot," says Dr. Driscoll. "If there is no dental problem, talk about prevention."

With seven small animal practices and 10 small animal doctors in a city of 50,000, Dr. Driscoll has seen his practice grow from 120 clients a month to 300. Dental services have added $1,200 a month to income. "Equipment makes all the difference in the world," he says. "I bought a dental scaler and polisher for $1,200 within the first month after buying this practice and recovered my money within four months.

"If you have a busy practice, modern equipment enables you to do the job more quickly. The return on the job is enhanced so you will do more prophys. Dentistry is easier to perform with the proper tools, so you'll be quicker to recommend procedures to clients."

Amazing clients

Seven months ago, Dr. B.D. Atterberry used orthopedic wire to correct an overbite in a young Lhasa apso. Within three weeks, the position of the lower canines began to correct itself. Was the $55 for the braces and $20 for anesthesia money well spent? You bet: Dr. Atterberry sent home a healthy pet with a satisfied client.

"Clients accept dental care once you explain the importance of a healthy mouth to their pet," he

A STRONG SHOW OF DENTAL SUPPORT

In a recent survey of 101 practitioners, VETERINARY ECONOMICS asked the doctors a series of questions about veterinary dentistry. The responses began with a bang when *98 percent* of the respondents said that they *do* offer dental services. Other results:

We asked the doctors how they alert their clients to these services and found that:

- 32 percent present dentistry information during exam-room conversations with clients
- 30 percent check the teeth of every patient
- 16 percent use waiting-room literature
- 13 percent use waiting-room displays
- 6 percent publish newsletter articles on dentistry
- 3 percent use other media–for example, videotapes, computers, seminars, and yearly dental exams

When we asked if clients are receptive to the idea of *home* dental care, 22 percent of the doctors said that "most" of their clients are receptive. Another 61 percent said that "some" of their clients are. Only 17 percent report that "few" of their clients are receptive to home dental care.

How much money does it take to make dentistry a part of your practice? The doctors reported various amounts, none higher than $7,000. For a breakdown of what they spent:

- 38 percent invested $1,000 or less
- 26 percent invested $1,001 to $2,000
- 15 percent invested $2,001 to $3,000
- 13 percent invested $3,001 to $4,000
- 8 percent invested $4,001 to $7,000

Of the respondents, 79 percent have realized a return on their investment. Of those who have not made dentistry a part of their practice, 71 percent say they plan to do so.

Finally, who are these doctors? Are they so very different from you? Their demographic description is as follows:

- 68 percent small animal doctors
- 28 percent mixed animal doctors
- 2 percent large animal doctors
- 40 percent solo practice
- 60 percent group practice
- 45 percent suburban
- 25 percent urban
- 30 percent rural

says. The 1960 Colorado State alumnus practiced for 18 years in the San Francisco Bay Area, then took a 2½-year sabbatical in real estate before purchasing a two-doctor practice in Rogers, Ark. He says that two-thirds of his clients want the same types of services his California clients did. The remaining one-third get rabies shots for their pets—whether they need it or not, he says with a laugh.

Three years ago, Dr. Atterberry began dabbling in dentistry, investing $4,000-plus in equipment. Within eight months, the products had paid for themselves. A dental costs his clients $45 and includes a complimentary toothbrush. Taking into account a few extractions, restorations, root canals, and the occasional orthodontia, dental services average $2,000 a month, or 7 percent of the doctor's gross.

With a traffic flow of 25 clients per day, the practice plans to target 5- to 6-year-old animals for dental reminders this summer. "You can bet that 90 percent of the animals at this age that have never undergone a cleaning need one," Dr. Atterberry says.

"The veterinarian must show special interest to notice slab fractures on premolars and periodontal problems that cause little pain, even though you can almost pull the tooth out with your fingers. Even when the pet exhibits little discomfort, periodontal infection leads to heart and kidney complications.

"That's why you have to take

the time to look into the animal's mouth and explain the ramifications to the client. Certainly, the work is there if I can do 80 prophys in less than four months with a client base of less than 3,000 people.

"In a practice this size, dentistry is more of a hobby than a money-maker, but it is a good service. From a professional standpoint, I feel good that one of my canine patients has held fillings for three years, and that I was able to save five teeth of an animal that was hit by a car."

Smiles all around

Dr. Donald L. Coshun operates a Waukesha, Wis., practice that was started by his grandfather in 1906. Just eight miles away sits Dr. Coshun's second small animal practice in Sussex. Between the two clinics, almost $7,000 worth of dental equipment paid for itself within a year.

Dr. Coshun sees his involvement in dentistry as a progressive interest since his graduation from the University of Minnesota in 1962. A charter member of the American Veterinary Dental Society, Dr. Coshun wore out several ultrasonic scaling units before purchasing air-driven equipment.

"Basically, I've always been interested in dental hygiene because you see so many infected mouths in practice, and a healthy mouth is so important to an animal's well-being," he says. "I feel that the risk of the complications of dental disease outweighs the risk of anesthesia. And client

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awareness and the availability of technology such as isoflurane anesthesia have all mushroomed to make dentistry more feasible.

"Times are changing: In the past, three-fourths of my clientele would wait up to two years to accept dental care for their pets. Today, clients rarely refuse dentals. In fact, the problem I have seems to be sending clients who have scheduled appointments for prophys home because their pets won't actually need the care for another year.

"Clients will bring up the subject even if the doctor won't, because they are repeatedly hit with advertising—on television and in consumer magazines such as GOOD HOUSEKEEPING—about the availability of veterinary dentistry."

Dr. Coshun charges $70 to $75 for a routine dental and reports that fees have increased by 40 percent in the past 20 years. "We're not keeping up with infla-

FIRED UP, PLUS YOUR MONEY BACK TO BOOT

Originally an Indiana farm boy, Dr. Charlie Sink eventually found himself seeing 125 patients—and smoking three packs of cigarettes—every day. Seven years later, the 1968 Purdue graduate packed his bags and headed for a practice in Cheyenne, Wyo.

Dr. Sink jumped just as enthusiastically into dentistry in February 1989, and he's never regretted either practice decision. Enthused by a dental course and wet lab offered by Dr. Peter Emily at Colorado State University, Dr. Sink immediately ordered $4,000 worth of equipment and went to work.

Recouping his investment within 60 days, Dr. Sink attributes 15 percent of his $200,000 gross in 1989 to dentistry. "Dentistry has been the easiest way to recover my investment in 22 years of practice," he says. "Plus, dentistry is the easiest service to sell because of the fantastic marketing job done by dentists."

Having performed an average of three dental procedures—including endodontic and orthodontic procedures, and periodontal surgeries—a week for the past year, Dr. Sink points out that veterinary dentistry is cheap in comparison to the average $350 root canal for humans. For endodontic procedures, he charges $100 for the first root, with $50 for subsequent roots, plus a $30 anesthesia fee. "In presenting the choice between pulling a tooth and performing a root canal, I've never had a client opt to pull the tooth," Dr. Sink says.

In addition to 20 to 25 root canals during the past year, the veterinarian has treated numerous slab fractures, fractured canine teeth, and cervical neck lesions in cats. Paying his technician a bonus of $2.50 per dental procedure, Dr. Sink charges $65 for basic prophys. He includes a toothbrush in this fee at cost because he considers its use vital. He advises clients to dip the toothbrush in garlic salt and water, then allow the pet to chew on the brush until the animal becomes accustomed to the feel. He instructs his clients to then dip the toothbrush in the tooth cleanser instead. To delay the time between prophys, the doctor recommends that clients pay close attention to the upper arcades.

Dr. Sink estimates that after explaining periodontal disease and recommending a prophy, 80 percent of his clients walk to the front desk to schedule dental appointments. Overall, 60 percent of his clientele comply with annual cleaning appointments for their pets.

"I believe dental care is a vital service to my clients," he says. "One day an older rancher, easily worth $1 million, who formerly wouldn't have considered small animal veterinary care, spent $175 for dentistry on his barn cat.

"If I can provide that type of service in Cheyenne, Wyo., I guarantee you can do the same in Chicago. If you don't have the money for equipment, pull out the charge card, go after it, and have some fun."

tion, but we are doing so many more dentals now," he says. He estimates that dentistry accounted for $25,000 of practice gross in 1989. Relying on technicians to perform routine prophys keeps the price of a dental affordable for clients, he says.

Lecturing to the local VMA and breeders, the doctor mails a quarterly newsletter to 4,000 clients and offers dental seminars. "With only 25 people in attendance, the seminars don't pay for themselves in direct dollar return," Dr. Coshun says, "but they give the doctors a chance to chat with clients outside the exam-room setting. Whether clients choose to attend, they do speak highly of 'the group that gives seminars.' "

Dr. Coshun has been working in veterinary medicine since he was hired to answer the phone after hours when he was in the seventh grade. Inspired as a "little shaver" by his grandfather, he remembers watching the older doctor carefully remove his coat and tie to don a rubber sleeveguard, then clean cows barehanded. What would his grandfather say if he could see his grandson fashioning a crown for a dog? Dr. Coshun is convinced his grandfather's response would be, "More power to you for doing animals this service."

The doctors interviewed for this article and for the survey report that the depth of your involvement in veterinary dentistry is individual, but the medical benefits to patients and the profit margin for practices is universal. ■